O.C.
10/24
AG

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	9/19
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FORMALITY REVIEW	HA	853	10·20·00
RESPONSE FORMALITY REVIEW	M	JL 261	01-04-01

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
– (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim			Date
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Claim			Date
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Claim			Date
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If more than 150 claims or 10 actions
staple additional sheet here

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